



Welcome to the 66th Annual
Safety & Health Conference

Duane Billinger

Paramedic/Instructor

35 years EMS

Flight medic

ER/ICU/Heart cathlab

Owner First Responder 2007

Clinical Instructor – Teleflex

Emergency Response Team(s)

The How (and why) To

**What is your
business?**

**Retail, industry,
offices??**

**What is your
Emergency
Action Plan
(EAP)?**

Emergency Action plan

- An **emergency action plan** (EAP) is a written document required by particular OSHA standards. [29 CFR 1910.38(a)] The purpose of an EAP is to facilitate and organize employer and employee actions during workplace **emergencies**.
- Firms with more than 10 employees must have a written emergency plan; smaller companies may communicate their plans orally.

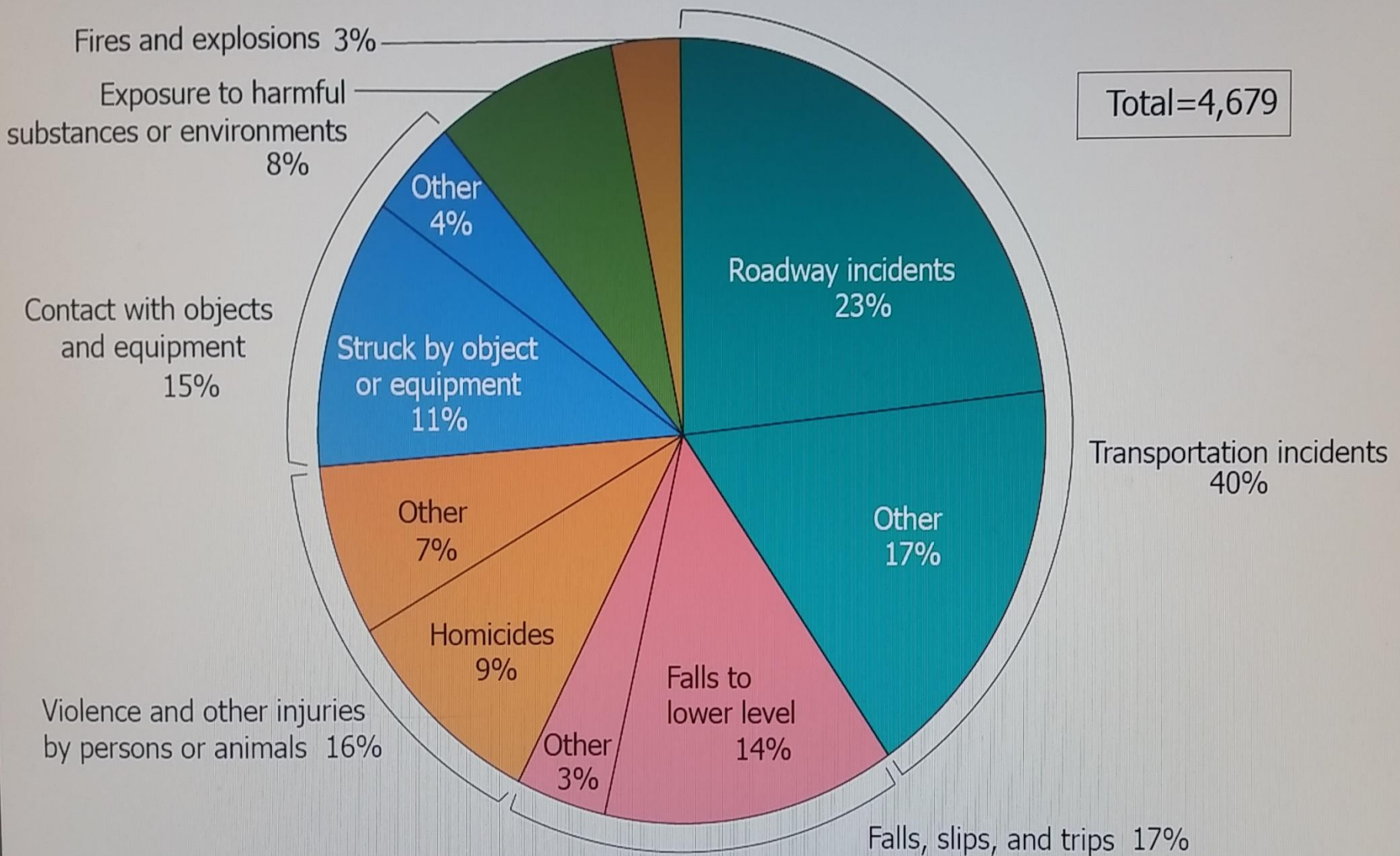
The OSHA requirement at
29 CFR 1910.151(b) states,

"In the absence of an infirmary, clinic, or hospital in near proximity to the workplace which is used for the treatment of all injured employees, a person or persons shall be adequately trained to render first aid. First aid supplies must be readily available.

"Many industry studies show that shortened response times for medical emergencies not only result in better medical outcomes, but lower costs for organizations that take measures to ensure first responders are quickly alerted in times of need," said John McNutt, co-founder and CEO for BluePoint.

The Liberty Mutual Workplace Study Index released in 2005 found that more than 60 percent of the senior financial executives surveyed reported that each \$1 invested in injury prevention returned \$2 or more.

Fatal occupational injuries by major event, 2014*



More fatal work injuries resulted from transportation incidents than from any other event in 2014. Roadway incidents alone accounted for nearly one out of every four fatal work injuries.

*Data for 2014 are preliminary.

Note: Transportation counts presented in this release are expected to rise when updated 2014 data are released in spring 2016 because key source documentation detailing

- There are remarkably few regulations affecting CPR and first aid programs in the workplace. The main OSHA standard regarding this topic is **29 CFR 1910.151** the "Access to Medical Care" standard. Aside from outlining the need for "adequate first aid supplies" (not very specific, although the ANSI standard for first aid kits is a good place to start), it does clearly create some employer requirements for training. **Basically, it states that employers must guarantee employees access to medical care.** After a request for interpretation, OSHA explains that if the workplace has a potential for severe life-threatening hazard (suffocation, electrocution, etc.), an employee must have medical care **within 3-4 minutes**. Where no such hazard exists, such as an office location, the standard is 15 minutes. Where a municipal emergency service is not available within the specified timeframe (in locations with severe hazards, the municipal EMS will likely not guarantee a 3-4 minute response time), employers must provide employees training in CPR and first aid.

**What do YOU
need for a
response team**

Employers should make an effort to obtain estimates of EMS response times for all permanent and temporary locations and for all times of the day and night at which they have workers on duty, and they should use that information when planning their first-aid program.

Kansas EMS

- EMR Emergency Medical Responder
- EMT Emergency Medical Technician
- AEMT Advanced Emergency Medical Technician
- Paramedic

Another relevant OSHA standard is 29 CFR 1910.1030 the Bloodborne Pathogens standard. This creates an obligation for additional training for employees who have anticipated contact with blood or bodily fluid as a result of a workplace activity or function. This means if you've assigned your employees to first aid duties (not simply trained them, but created an expectation of service) , there are some additional compliance needs. Most of these are very simple training burdens, but there may be a need for Hepatitis B vaccination in some cases.

4 STEPS IN THE PLANNING PROCESS

Step 1 -- Establish a Planning Team

Step 2 -- Analyze Capabilities and Hazards

Step 3 -- Develop the Plan

Step 4 -- Implement the Plan

Emergency Response Teams

Members of emergency response teams should be thoroughly trained for potential emergencies and physically capable of carrying out their duties; know about toxic hazards in the workplace and be able to judge when to evacuate personnel or depend on outside help (e.g. when a fire is too large for them).

One or more team members must be trained in:

Use of various types of fire extinguishers.

First aid, including cardiopulmonary resuscitation (CPR).

The requirements of the OSHA bloodborne pathogens standard.

Shutdown procedures.

Size of your team will depend on your business.

Must have ERT's for each shift.

Medical literature establishes that, for serious injuries such as those involving stopped breathing, cardiac arrest, or uncontrolled bleeding, first aid treatment must be provided within the first few minutes to avoid permanent medical impairment or death.

MERT training:

The flagship emergency team training at one agency is the Medical Emergency Response Team or "MERT" program.

It is an 8-hour program that encompasses adult CPR, AED, Bloodborne Pathogens, first aid and emergency oxygen training, and is designed as a one-day workshop to acclimate trainees to occupational emergency care.

It is often implemented as part of a training and equipment purchase and can include the necessary elements to create a response team including documentation, forms, policy and procedure, and other systemic elements.

This program is intended for organizations with dedicated emergency response teams who are looking for a premium training program.



**COMMUNITY EMERGENCY
RESPONSE TEAM**

Notification of Emergency Response Teams:

PA system
Radios
Cell phones

Organizations for First Aid and CPR

American Red Cross

National Safety Council

Medic First Aid

American Safety & Health Institute

Additional training
should or may include:

Bloodborne Pathogens

Fire Extinguisher

Oxygen Administration

Hazardous Materials

Quality of training does not
depend on the organization,
it depends on
the instructor.

FACT:

**SCA causes 13% of
workplace fatalities
every year.**

- Automated External Defibrillator (AED) laws vary from state to state, and are also an important regulatory component if your program includes that type of device. Although each state has its own act for allowing Public Access Defibrillation (PAD), the standard template includes liability immunity for the AED's owner and users provided CPR and AED training is provided, device maintenance is conducted as per the manufacturer's specifications, and other requirements are followed.
- Although there are not too many laws that force a general workplace to have an AED, it is an important life-saving therapy for victims of sudden cardiac arrest. The support for such devices from third-party experts is also very strong. OSHA has a letter of endorsement for the devices, as does the American Heart Association and the American Safety & Health Institute.

In 2001 and 2002, there were 6628 workplace fatalities reported to OSHA;
1216 from heart attack,
354 from electric shock, and
267 from asphyxia.

A number of these victims, up to 60 percent, might have been saved if automated external defibrillators (AEDs) were immediately available.

US Dept of Labor



SAFETY AND HEALTH TOPICS

Automated External Defibrillators (AEDs)



[OSHA Standards](#)

[AEDs in the Workplace](#)

[AED Programs](#)

[Additional Information](#)

[Safety and Health Topics](#) ▼

Approximately 890 deaths from coronary heart disease occur outside of the hospital or emergency room every day. Most of these deaths are due to the sudden loss of heart function or sudden cardiac death.¹ In 2001 and 2002, there were 6628 workplace fatalities reported to OSHA; 1216 from heart attack, 354 from electric shock, and 267 from asphyxia. A number of these victims, up to 60 percent, might have been saved if automated external defibrillators (AEDs) were immediately available. Chances of survival from sudden cardiac death diminish by 7 – 10 percent for each minute without immediate CPR or defibrillation. After 10 minutes, resuscitation rarely succeeds.

An AED is an electronic device designed to deliver an electric shock to a victim of sudden cardiac arrest. Ventricular fibrillation may be restored to normal rhythm up to 60 percent of the time if treated promptly with an AED, a procedure called defibrillation.

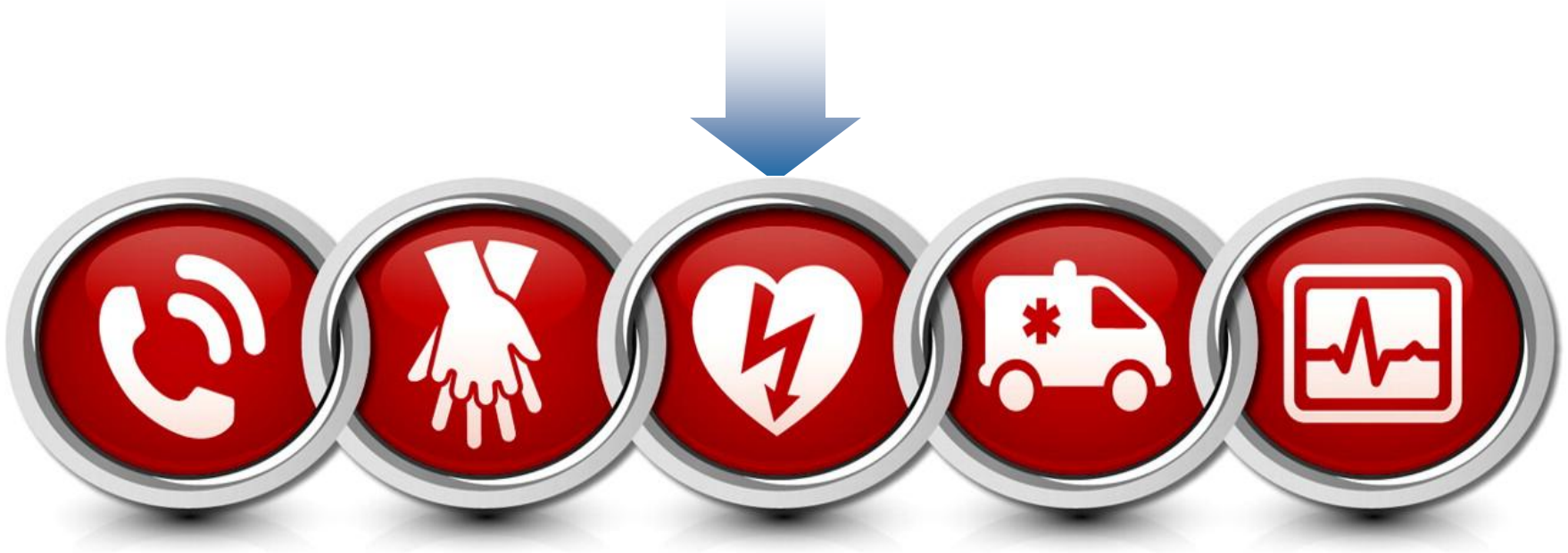
OSHA does not have standards specific to automated external defibrillators (AEDs). However, exposures to first-aid hazards are addressed in specific standards for the general industry.

Highlights

- [Cardiac Arrest and Automated External Defibrillators \(PDF*\)](#). OSHA Technical Information Bulletin (TIB), (December 17, 2001).
- [Saving Sudden Cardiac Arrest Victims in the Workplace: Automated External Defibrillators \(PDF\)](#). OSHA Publication 3185, (2003). Provides information on the importance of readily-available AEDs, and encourages the installation of the devices in workplaces. Also includes a list

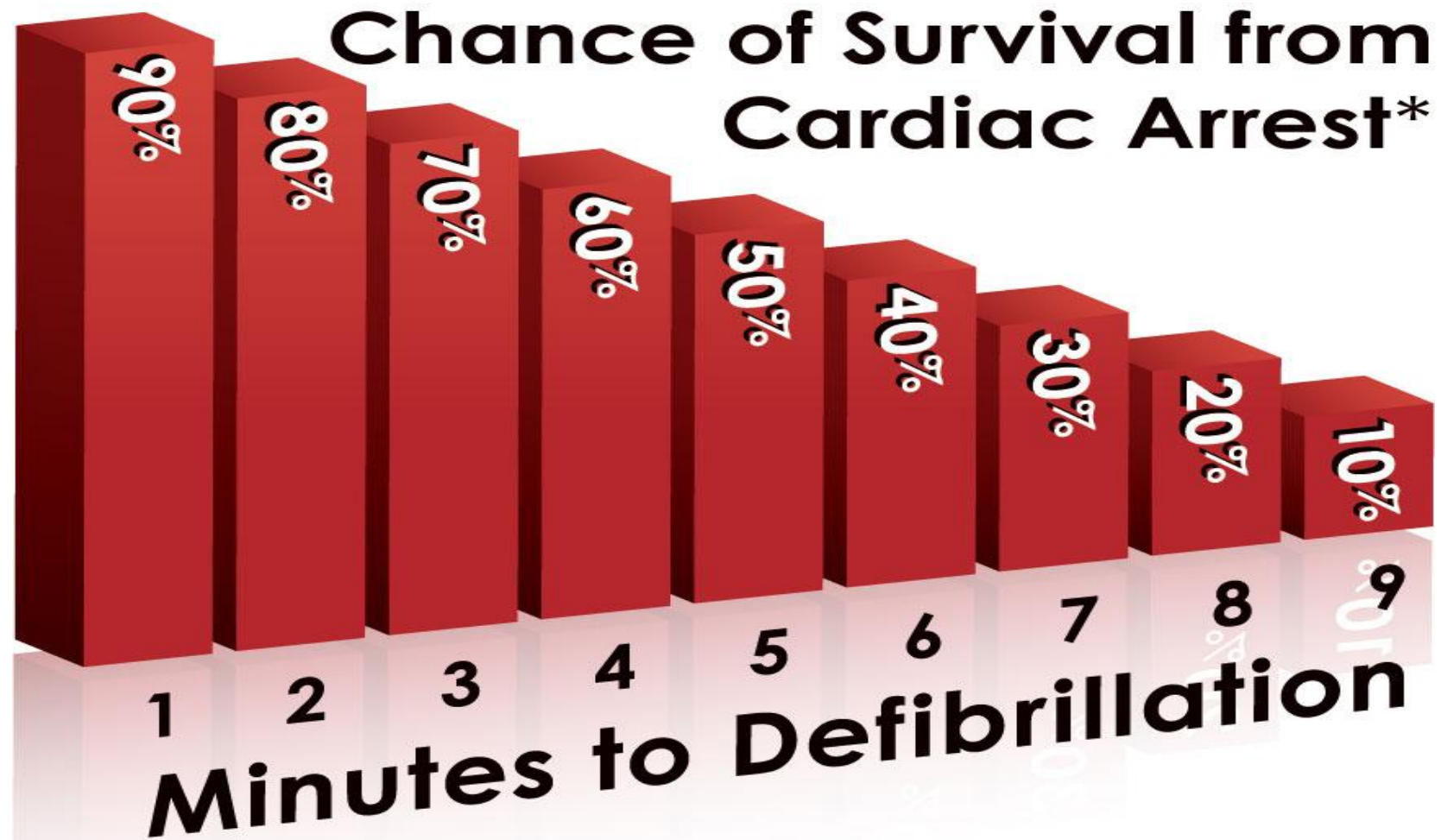
Chain of Survival

Defibrillation an **EARLY** priority



**Well performed CPR and early defibrillation
are the only out-of-hospital interventions
that improves outcome!**

Why “Early” Treatment?



Something to think about

“...The most important determinant of Survival from sudden cardiac arrest is the presence of a rescuer who is trained, willing, able and equipped to act in an emergency.”

2005 AHA Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care, Part IV: Adult Basic Life Support. Circulation. 2005;112 (Suppl. IV): IV-19-IV-34.



Employers should review
Plans with employees

Employees' understanding of and
willingness to follow the plan will
ensure their safety!

